



02-10-86

1FW3754
PTO/SB/21 (09-04)

| | | | |
|--|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | Application Number | 10/045,132 | |
| | Filing Date | October 23, 2001 | |
| | First Named Inventor | B. Scott Driggs | |
| | Art Unit | 3754 | |
| | Examiner Name | Eric S. Keasel | |
| Total Number of Pages in This Submission | 12 | Attorney Docket Number | 20174C-002910US |

| ENCLOSURES (Check all that apply) | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard |
| | | Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|------------------------------------|----------|--------|
| Firm Name | Townsend and Townsend and Crew LLP | | |
| Signature | | | |
| Printed name | Milan M. Vinnola | | |
| Date | February 8, 2006 | Reg. No. | 45,979 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
|---|---------------|------|------------------|
| Express Mail Label: EV326937089US I hereby certify that this correspondence is being deposited with the United States Postal Service with "Express Mail Post Office to Address" service under 37 CFR 1.10 on this date February 8, 2006 and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Signature | | | |
| Typed or printed name | Aurora Lowell | Date | February 8, 2006 |